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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF TENNESSEE	-	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/22

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on	Dale	 Stephanie
	your government-issued picture identification (for	First name	First name
	example, your driver's	Lynn	Diane
	license or passport).	Middle name	Middle name
	Bring your picture identification to your	Ables	Ables
	meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names and any assumed, trade names and doing business as names.		
	Do NOT list the name of any separate legal entity such as a corporation, partnership, or LLC that is not filing this petition.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-5830	xxx-xx-8789

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Debtor 1 Dale Lynn Ables
Debtor 2 Stephanie Diane Ables

Case number (if known) About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Your Employer **Identification Number** (EIN), if any. EIN EIN If Debtor 2 lives at a different address: Where you live 11906 State Hwy 58 Decatur, TN 37322 Number, Street, City, State & ZIP Code Number, Street, City, State & ZIP Code Meigs County County If your mailing address is different from the one If Debtor 2's mailing address is different from yours, fill it above, fill it in here. Note that the court will send any in here. Note that the court will send any notices to this notices to you at this mailing address. mailing address. P.O. Box 933 Decatur, TN 37322 Number, P.O. Box, Street, City, State & ZIP Code Number, P.O. Box, Street, City, State & ZIP Code Why you are choosing Check one: Check one: this district to file for bankruptcy Over the last 180 days before filing this petition, Over the last 180 days before filing this petition, I I have lived in this district longer than in any have lived in this district longer than in any other other district. district. I have another reason. I have another reason. Explain. (See 28 U.S.C. § 1408.) Explain. (See 28 U.S.C. § 1408.)

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	otor 1 otor 2	Dale Lynn Ables Stephanie Diane A	bles				Case number (if known)	
Par	t 2:	Tell the Court About	our Bankı	uptcy Ca	se			
7.	Bank	chapter of the ruptcy Code you are			orief description of each, go to the top of page 1		by 11 U.S.C. § 342(b) for Individuals Fibriate box.	ing for Bankruptcy
	choo	sing to file under	■ Chapt	er 7				
			☐ Chapt	er 11				
			☐ Chapt	er 12				
			☐ Chapt	er 13				
8.	How	you will pay the fee	abo ordo a pi	ut how yo er. If your e-printed	heck with the clerk's office in your local e yourself, you may pay with cash, cash behalf, your attorney may pay with a crepoption, sign and attach the Application for	ier's check, or money dit card or check with		
			☐ I rebut	Filing Fe quest that is not req lies to you	e in Installments (Officia t my fee be waived (Youred to, waive your fee, ur family size and you ar	I Form 103A). The may request this operand may do so only included the second of the feet and the feet the feet and the feet the feet and the feet	otion only if you are filing for Chapter 7. If your income is less than 150% of the ce in installments). If you choose this op Official Form 103B) and file it with your p	By law, a judge may, official poverty line that tion, you must fill out
9.	bank	you filed for ruptcy within the 3 years?	■ No.					
				District		When	Case number	
				District		When	Case number	
				District		When	Case number	
10.	cases filed not fi you,	iny bankruptcy s pending or being by a spouse who is ling this case with or by a business ier, or by an ate?	■ No □ Yes.					
				Debtor			Relationship to you	
				District		When	Case number, if known	
				Debtor			Relationship to you	
				District		When	Case number, if known	
11.		ou rent your ence?	■ No.	Go to I	ine 12.			
	. 5514		☐ Yes.	Has yo	ur landlord obtained an	eviction judgment aga	ainst you?	
					No. Go to line 12.			
					Yes. Fill out <i>Initial State</i> this bankruptcy petition		ion Judgment Against You (Form 101A)	and file it as part of

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	otor 1 Dale Lynn Ables otor 2 Stephanie Diane	Ables		Case number (if known)
Par	t 3: Report About Any Bu	ısinesses	You Own as a Sole Proprie	etor
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.	
		☐ Yes.	Name and location of bu	siness
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, Street, City, Sta	ate & ZIP Code
	it to this petition.		Check the appropriate b	ox to describe your business:
	·			iness (as defined in 11 U.S.C. § 101(27A))
			☐ Single Asset Rea	al Estate (as defined in 11 U.S.C. § 101(51B))
			☐ Stockbroker (as	defined in 11 U.S.C. § 101(53A))
			☐ Commodity Brok	er (as defined in 11 U.S.C. § 101(6))
			☐ None of the abov	ve
13.	Are you filing under Chapter 11 of the Bankruptcy Code, and are you a <i>small business</i> <i>debtor</i> or a debtor as defined by 11 U.S. C. § 1182(1)? For a definition of <i>small</i> <i>business debtor</i> , see 11 U.S.C. § 101(51D).	proceed you are c cash-flov § 1116(1) ■ No. □ No.	under Subchapter V so that choosing to proceed under S v statement, and federal inco (B). I am not filing under Chapter Code.	r 11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.		r 11, I am a small business debtor according to the definition in the Bankruptcy Code, and ed under Subchapter V of Chapter 11.
		☐ Yes.		r 11, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and I r Subchapter V of Chapter 11.
Par	t 4: Report if You Own or	Have Any	y Hazardous Property or A	ny Property That Needs Immediate Attention
14.	Do you own or have any	■ No.		
	property that poses or is alleged to pose a threat	☐ Yes.		
	of imminent and identifiable hazard to public health or safety? Or do you own any		What is the hazard?	
	property that needs immediate attention?		If immediate attention is needed, why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?	
				Number, Street, City, State & Zip Code

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Debtor 1	Dale Lynn Ables		
Debtor 2	Stephanie Diane Ables	Case number (if known)	

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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	otor 1 otor 2	Dale Lynn Ables Stephanie Diane A	bles			Case nu	umber (if known)		
Par	t 6:	Answer These Questi	ons for Rep	orting Purposes					
	What	kind of debts do	16a. A	are your debts primarily consumedividual primarily for a personal,			e defined in 11 U.S.C. §	101(8) as "incurred by an	
	-			☐ No. Go to line 16b.	•				
				■ Yes. Go to line 17.					
				Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.					
				☐ No. Go to line 16c.					
				Yes. Go to line 17.					
			16c. S	State the type of debts you owe the	at are not consum	ner debts or bus	siness debts		
17.		ou filing under oter 7?	□ No. I	am not filing under Chapter 7. Go	o to line 18.				
	after prop	ou estimate that any exempt erty is excluded and nistrative expenses	– 163. a	am filing under Chapter 7. Do you re paid that funds will be available	u estimate that aft e to distribute to υ	er any exempt insecured credi	property is excluded ar itors?	nd administrative expenses	
	are p	aid that funds will		No					
	distri	vailable for ibution to unsecured tors?] Yes					
18.		many Creditors do	1 -49		1 ,000-5,000		2 5,001-5	0,000	
	you e	estimate that you	☐ 50-99		☐ 5001-10,000		☐ 50,001-10		
			□ 100-199 □ 200-999		10,001-25,00	00	☐ More that	n100,000	
19.		much do you	\$ 0 - \$50	.000	□ \$1,000,001 -	\$10 million	□ \$500,000),001 - \$1 billion	
		nate your assets to orth?		- \$100,000	☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million			00,001 - \$10 billion	
			□ \$100,001 - \$500,000 □ \$500,001 - \$1 million		□ \$100,000,001 - \$500 million			000,001 - \$50 billion n \$50 billion	
20.		much do you	□ \$0 - \$50	,000	□ \$1,000,001 -	\$10 million	□ \$500,000),001 - \$1 billion	
	estin to be	nate your liabilities ?		- \$100,000	□ \$10,000,001	•	_ ` ' '	000,001 - \$10 billion	
			■ \$100,001 - \$500,000 □ \$500,001 - \$1 million		□ \$50,000,001 □ \$100,000,00			,000,001 - \$50 billion an \$50 billion	
Par	t 7:	Sign Below							
For	you		I have exam	nined this petition, and I declare u	ınder penalty of p	erjury that the i	information provided is	true and correct.	
				osen to file under Chapter 7, I am es Code. I understand the relief a					
				ey represents me and I did not pa I have obtained and read the noti				lp me fill out this	
			I request re	lief in accordance with the chapte	er of title 11, Unite	d States Code,	, specified in this petitio	n.	
				d making a false statement, conc case can result in fines up to \$25					
			/s/ Dale L	ynn Ables			ie Diane Ables		
			Dale Lynr Signature of			Stephanie D Signature of D			
			Executed o	December 15, 2023 MM / DD / YYYY		Executed on	December 15, 2023	3	

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Debtor 1 Debtor 2 Dale Lynn Able Stephanie Dian		Case number (if known)			
For your attorney, if you are represented by one	under Chapter 7, 11, 12, or 13 of title 11, United	States Code, and have	e informed the debtor(s) about eligibility to proceed explained the relief available under each chapter debtor(s) the notice required by 11 U.S.C. § 342(b)		
If you are not represented b an attorney, you do not nee to file this page.	y and, in a case in which § 707(b)(4)(D) applies, co		wledge after an inquiry that the information in the		
	/s/ Eron H. Epstein	Date	December 15, 2023		
	Signature of Attorney for Debtor		MM / DD / YYYY		
	Eron H. Epstein 007007				
	Printed name				
	Bankruptcy Affiliates				
	Firm name				
	713 Cherry Street				
	Chattanooga, TN 37402				
	Number, Street, City, State & ZIP Code				
	Contact phone 423-267-1512	Email address			
	007007 TN				
	Bar number & State				

Fill in	this inforn	nation to identify your	case:			
Debto		Dale Lynn Ables				
		First Name	Middle Name	Last Name		
Debto	r 2 if, filing)	Stephanie Diane	Ables Middle Name	Last Name		
		nkruptcy Court for the:	EASTERN DISTRICT OF			
_		intropicy Court for the.	- ENGIERAL DIGITALOT OF	TENNEGGEE		
Case i	number _					heck if this is an mended filing
Stat	ement			duals Filing for E	Sankruptcy equally responsible for sup	04/22
		nore space is needed, n). Answer every ques		this form. On the top of an	y additional pages, write you	r name and case
Part 1	Give D	Details About Your Ma	rital Status and Where You	ı Lived Before		
1. W	hat is you	r current marital statu	s?			
	Married Not mai					
2. D	uring the l	ast 3 years, have you	lived anywhere other than	where you live now?		
	No Yes. Lis	st all of the places you li	ved in the last 3 years. Do n	ot include where you live nov	v.	
D	Debtor 1:		Dates Debtor 1 lived there	Debtor 2 Prior Ad	ldress:	Dates Debtor 2 lived there
					nity property state or territory ico, Texas, Washington and W	
	No Yes. Ma	ake sure you fill out <i>Sch</i>	edule H: Your Codebtors (O	fficial Form 106H).		
Part 2	Explai	in the Sources of You	r Income			
Fi	II in the tota	al amount of income you	received from all jobs and	ng a business during this y all businesses, including part e together, list it only once u		ndar years?
	l No l Yes. Fil	I in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	st calenda ary 1 to De	r year: ecember 31, 2023)	■ Wages, commissions, bonuses, tips	\$51,438.03	■ Wages, commissions, bonuses, tips	\$0.00
			☐ Operating a business		☐ Operating a business	

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	Stephanie Dia				Cas	e number (if known)		
		D	ebtor 1			Debtor 2		
		Se	ources of income heck all that apply.	Gross income (before deduction exclusions)	ons and	Sources of inc Check all that a		Gross income (before deductions and exclusions)
	endar year befo to December 3	1 2022 \	Wages, commissions, onuses, tips	\$53,	037.00	■ Wages, combonuses, tips	missions,	\$13,741.00
			Operating a business			☐ Operating a	business	
Include i and othe winnings List each	income regardle er public benefit s. If you are filin	ess of whether t t payments; pen ng a joint case an ne gross income	aring this year or the two hat income is taxable. Exa sions; rental income; inter nd you have income that y from each source separa	amples of other incorrest; dividends; more you received togeth	ome are a ney collect er, list it o	ted from lawsuits; only once under De	royalties; and btor 1.	ecurity, unemployment, I gambling and lottery
		De	ebtor 1			Debtor 2		
		Sc	purces of income escribe below.	Gross income each source (before deduction exclusions)		Sources of inco Describe below.		Gross income (before deductions and exclusions)
Part 3: Li	st Certain Pay	ments You Ma	de Before You Filed for	Bankruptcy				
6. Are eith □ No.	. Neither Del individual pr	btor 1 nor Debt rimarily for a per 90 days before y Go to line 7. List below each	ebts primarily consumer for 2 has primarily consumers resonal, family, or househow you filed for bankruptcy, di	umer debts. Consuld purpose." d you pay any cred d a total of \$7,575*	itor a tota	I of \$7,575* or mor n one or more pay	re? ments and th	ne total amount you
	* Subject to	not include pay	or. Do not include paymer ments to an attorney for the 4/01/25 and every 3 year	his bankruptcy case	e.		• •	•
■ Yes			oth have primarily consurous filed for bankruptcy, di		itor a tota	l of \$600 or more?		
	■ No.	Go to line 7.						
	□ _{Yes}	include paymer	n creditor to whom you paints for domestic support of bankruptcy case.					
Credito	or's Name and	Address	Dates of payme	ent Total ar	nount paid	Amount you still owe	Was this p	ayment for
<i>Insiders</i> of which	include your re you are an offi ess you operate	latives; any gen cer, director, pe	nkruptcy, did you make a leral partners; relatives of rson in control, or owner of lietor. 11 U.S.C. § 101. Inc	any general partne of 20% or more of the	rs; partne neir voting	rships of which you securities; and an	u are a gener ly managing	ral partner; corporations agent, including one for
■ No	- 1:-4 -0 ·· -·	anda da la la facilità						
☐ Yes	s. List all payme	ents to an inside	er.					

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	otor 1 Dale Lynn Ables Stephanie Diane Ables		Case number (if known)				
8.	Within 1 year before you filed for bankrupte insider? Include payments on debts guaranteed or cos		ments or transfer a	any property on a	account of a de	bt that benefited an	
	■ No□ Yes. List all payments to an insider						
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for t		
Par	t 4: Identify Legal Actions, Repossession	ns, and Foreclosures					
9.	Within 1 year before you filed for bankrupte. List all such matters, including personal injury modifications, and contract disputes.						
	Yes. Fill in the details.						
	Case title Case number	Nature of the case	Court or agency		Status of the	case	
	Star Trust Financial Services LLC vs. Dale Lynn Ables 23GS8935	Civil Action	Hamilton County General Sessions Court 102 Courts Building 600 Market Street Chattanooga, TN 37402		■ Pending □ On appeal □ Concluded		
	Morgan's Rento to Own Center vs. Dale Lynn Ables GS2023-CV-989	Civil Action	Rhea County G Sessions Cour 1475 Market St 102 Dayton, TN 373	t reet, Room	■ Pending □ On appeal □ Concluded		
10.	Within 1 year before you filed for bankrupte. Check all that apply and fill in the details below ■ No. Go to line 11. □ Yes. Fill in the information below.		erty repossessed, f	oreclosed, garni	shed, attached,	seized, or levied?	
	Creditor Name and Address	Describe the Property		Date	•	Value of the	
		Explain what happened	d			property	
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment bec ■ No □ Yes. Fill in the details.		luding a bank or fii	nancial institutio	n, set off any ar	nounts from your	
	Creditor Name and Address	Describe the action the	e creditor took	Date take	e action was	Amount	
12.	Within 1 year before you filed for bankruptcourt-appointed receiver, a custodian, or a ■ No □ Yes		erty in the possess	ion of an assign	e for the benef	it of creditors, a	

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	btor 2 Stephanie Diane Ables			Case number (if known)	
Pai	rt 5: List Certain Gifts and Contribution	ıs				
	Within 2 years before you filed for bankr		lid you give any gifts with a total val	ue of more th	an \$600 per person?	·
	■ No					
	☐ Yes. Fill in the details for each gift.					
	Gifts with a total value of more than \$60 per person	00	Describe the gifts		Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:					
14.	Within 2 years before you filed for bankr	uptcy, o	did you give any gifts or contribution	s with a total	value of more than	\$600 to any charity?
	■ No	,	, , , ,			
	☐ Yes. Fill in the details for each gift or c	ontribut	ion.			
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code		Describe what you contributed		Dates you contributed	Value
Dat	rt 6: List Certain Losses					
Га	List Certain Losses					
15.	Within 1 year before you filed for bankru or gambling?	ptcy or	since you filed for bankruptcy, did y	ou lose anytl	hing because of thef	t, fire, other disaster
	■ No					
	☐ Yes. Fill in the details.					
	Describe the property you lost and	Descri	be any insurance coverage for the lo	oss	Date of your	Value of property
	how the loss occurred		e the amount that insurance has paid. L		loss	lost
		insurar	nce claims on line 33 of Schedule A/B:	Property.		
Pai	rt 7: List Certain Payments or Transfers	S				
16.	Within 1 year before you filed for bankru consulted about seeking bankruptcy or Include any attorneys, bankruptcy petition p	preparii	ng a bankruptcy petition?			rty to anyone you
	moldae any altorneys, bankruptey petition p	лорагог	s, or credit counseling agencies for ser	vices required	iii your barikruptoy.	
	■ No					
	☐ Yes. Fill in the details.					
	Person Who Was Paid		Description and value of any prop	erty	Date payment	Amount of
	Address Email or website address		transferred		or transfer was made	payment
	Person Who Made the Payment, if Not Y	ou '			maac	
17.	Within 1 year before you filed for bankru promised to help you deal with your cree Do not include any payment or transfer that No	ditors o	r to make payments to your creditor	behalf pay o s?	r transfer any prope	rty to anyone who
	Yes. Fill in the details.					
	Person Who Was Paid		Description and value of any prop	ertv	Date payment	Amount of
	Address		transferred	City	or transfer was made	payment
18.	Within 2 years before you filed for bankr transferred in the ordinary course of you include both outright transfers and transfers include gifts and transfers that you have all No	ı r busin s made a	ess or financial affairs? as security (such as the granting of a se			
	☐ Yes. Fill in the details.					
	Person Who Received Transfer Address		Description and value of property transferred	payments	iny property or received or debts	Date transfer was made
	Person's relationship to you			paid in exc	Juanye	

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Debtor 1 Dale Lynn Ables
Debtor 2 Stephanie Diane Ables

Case number (if known)

19.	beneficiary? (These are often called asset-protect No	• •	y property to a	a seir-settie	a trust or similar device (or which you are a
	☐ Yes. Fill in the details.					
	Name of trust	Description and v	alue of the pro	operty trans	sferred	Date Transfer was made
Pai	t 8: List of Certain Financial Accounts, Instru	uments, Safe Deposit	Boxes, and S	torage Uni	ts	
20.	Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or chouses, pension funds, cooperatives, associated No	other financial accour	nts; certificate	s of deposi		, ,
	Yes. Fill in the details.					
		ast 4 digits of ccount number	Type of acco	ount or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 year cash, or other valuables?	ar before you filed for	bankruptcy, a	iny safe de	posit box or other deposi	tory for securities,
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe	the contents	Do you still have it?
22.	Have you stored property in a storage unit or p		home within	1 year befo	re you filed for bankruptc	y?
	■ No □ Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, S State and ZIP Code)		Describe	the contents	Do you still have it?
Pai	t 9: Identify Property You Hold or Control for	r Someone Else				
23.	Do you hold or control any property that some for someone.	eone else owns? Inclu	ude any prope	rty you bor	rowed from, are storing fo	or, or hold in trust
	■ No □ Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe	the property	Value
Pai	t 10: Give Details About Environmental Inform	nation				
For	the purpose of Part 10, the following definitions	s apply:				
	Environmental law means any federal, state, o toxic substances, wastes, or material into the regulations controlling the cleanup of these su	air, land, soil, surface	water, groun			
	Site means any location, facility, or property as to own, operate, or utilize it, including disposa		environmental	law, wheth	er you now own, operate	, or utilize it or used
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or		as a hazardou	s waste, ha	zardous substance, toxic	substance,

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

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Debtor 1 Dale Lynn Ables
Debtor 2 Stephanie Diane Ables

Case number (if known)

24.	Has any governmental unit notified you that y ■ No	you may be liable or potentially liable	under or in violation of an environme	ntal law?
	Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of a	ny release of hazardous material?		
	■ No □ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
26.	Have you been a party in any judicial or admi 	nistrative proceeding under any envir	ronmental law? Include settlements a	nd orders.
	■ No □ Yes. Fill in the details.			
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case
Par	11: Give Details About Your Business or C	onnections to Any Business		
27.	Within 4 years before you filed for bankruptc	y, did you own a business or have an	y of the following connections to any	business?
	☐ A sole proprietor or self-employed in	a trade, profession, or other activity,	either full-time or part-time	
	☐ A member of a limited liability compa	ny (LLC) or limited liability partnershi	p (LLP)	
	☐ A partner in a partnership			
	☐ An officer, director, or managing exe	cutive of a corporation		
	☐ An owner of at least 5% of the voting	or equity securities of a corporation		
	No. None of the above applies. Go to Pa	art 12.		
	Yes. Check all that apply above and fill i	n the details below for each business		
	Business Name Address	Describe the nature of the business	Employer Identification number Do not include Social Security n	umber er ITIN
		Name of accountant or bookkeeper	Dates business existed	umber of Trine.
28.	Within 2 years before you filed for bankruptoinstitutions, creditors, or other parties.	y, did you give a financial statement to	o anyone about your business? Inclu	de all financial
	No			
	Yes. Fill in the details below.	Data Isana d		
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued		

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Debtor 1	Dale Lynn Ables		3
Debtor 2	Stephanie Diane Ables		Case number (if known)
Part 12:	Sign Below		
are true a with a ba	nd correct. I understand that making a	false statement	nd any attachments, and I declare under penalty of perjury that the answers i, concealing property, or obtaining money or property by fraud in connection prisonment for up to 20 years, or both.
/s/ Dale	Lynn Ables	/s/ Ste	ephanie Diane Ables
Dale Ly	nn Ables	Steph	nanie Diane Ables
Signatur	e of Debtor 1	Signat	ture of Debtor 2
Date D	ecember 15, 2023	Date	December 15, 2023
•	ttach additional pages to Your Stateme	ent of Financial	Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
■ No			
☐ Yes			
Did you p	ay or agree to pay someone who is no	t an attorney to	help you fill out bankruptcy forms?
■ No			
☐ Yes. N	ame of Person Attach the Bankru	ıptcy Petition Prej	parer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this inform	mation to identify your	case:		
Debtor 1	Dale Lynn Ables			
	First Name	Middle Name	Last Name	
Debtor 2	Stephanie Diane	Ables		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	inkruptcy Court for the:	EASTERN DISTRICT C	F TENNESSEE	
Case number _				
, ,				

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

2/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
		~	
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	18,100.69
	1c. Copy line 63, Total of all property on Schedule A/B	\$	18,100.69
Par	t 2: Summarize Your Liabilities		
			iabilities It you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	17,911.82
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	350.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	100,608.58
	Your total liabilities	\$	118,870.40
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I)	c	3,759.00
	Copy your combined monthly income from line 12 of Schedule I	Φ	3,759.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,745.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?		
	No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other scl	hedules.
	Yes		

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- ☐ Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Dale Lynn Ables Stephanie Diane Ables	Case number (if known)	
		Т

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

4,882.83

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total c	aim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	350.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	63,919.05
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	64,269.05

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		Main Document Page 17 of 50)	
Fill in this info	rmation to identify your case a	nd this filing:		
Debtor 1	Dale Lynn Ables			
		Middle Name Last Name		
Debtor 2	Stephanie Diane Ables			
(Spouse, if filing)	First Name	Middle Name Last Name		
United States B	ankruptcy Court for the: EAST	ERN DISTRICT OF TENNESSEE		
Case number				☐ Check if this is an
				amended filing
Official Fo	orm 106A/B			
<u>Scheau</u>	le A/B: Property	<i>y</i>		12/15
think it fits best. information. If mo Answer every que	Be as complete and accurate as po ore space is needed, attach a separ estion.	List an asset only once. If an asset fits in more than or possible. If two married people are filing together, both ar ate sheet to this form. On the top of any additional page or Other Real Estate You Own or Have an Interest In	re equally responsible for su	pplying correct
	-	st in any residence, building, land, or similar property?		
_				
No. Go to Pa	art 2.			
☐ Yes. Where	is the property?			
Part 2: Describe	e Your Vehicles			
		interest in any vehicles, whether they are register		hicles you own that
someone else dr	rives. If you lease a vehicle, also	report it on Schedule G: Executory Contracts and Ui	nexpired Leases.	
3. Cars, vans, t	rucks, tractors, sport utility ve	hicles, motorcycles		
П.,				
□ No				
Yes				
			Do not doduct cooured als	simo or avametions. Dut
3.1 Make:	Ford	Who has an interest in the property? Check one	Do not deduct secured cla the amount of any secure	
Model:	F-150	Debtor 1 only	Creditors Who Have Clair	ns Secured by Property.
Year:	2011	Debtor 2 only	Current value of the	Current value of the
Approxima	ate mileage: 202,000	■ Debtor 1 and Debtor 2 only	entire property?	portion you own?
Other info	rmation:	At least one of the debtors and another		
		☐ Check if this is community property (see instructions)	\$8,000.00	\$8,000.00
4 10/-1		d adhan na ana adhan al sa bhala a adh an sa bhala a an d		
		d other recreational vehicles, other vehicles, and tercraft, fishing vessels, snowmobiles, motorcycle ac		
<i>Елатріов.</i> Во	ato, transfe, metere, percenar wa	notorials, nothing voccolo, one minositos, motoroyote ac	,000001100	
■ No				
☐ Yes				
5 Add the doll	lar value of the portion you ow	n for all of your entries from Part 2, including any	y entries for	
		that number here		\$8,000.00
Part 3: Describe	e Your Personal and Household Ite	ems		
Do you own or	have any legal or equitable in	terest in any of the following items?		Current value of the
				oortion you own?

claims or exemptions.

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Debtor 1 Debtor 2	Dale Lynn Ables Stephanie Diane Ables Case number (if known)	
<i>Examp</i> □ No	old goods and furnishings les: Major appliances, furniture, linens, china, kitchenware Describe	
_ 100.	Household Goods	\$2,000.00
	Refrigerator & Stove	\$3,500.00
□No	nics les: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music coincluding cell phones, cameras, media players, games Describe	ollections; electronic devices
	Electronics	\$500.00
Examp No Yes. P. Equipm Examp	 bles of value les: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, other collections, memorabilia, collectibles Describe ent for sports and hobbies les: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes a musical instruments Describe 	
■ No	ns bles: Pistols, rifles, shotguns, ammunition, and related equipment Describe	
□ No	s bles: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Describe	
	Clothes	\$500.00
■ No □ Yes. 13. Non-fa Exam ■ No □ Yes. 14. Any o	y oles: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, ge Describe Irm animals oles: Dogs, cats, birds, horses Describe ther personal and household items you did not already list, including any health aids you did not list Give specific information	old, silver
	the dollar value of all of your entries from Part 3, including any entries for pages you have attached art 3. Write that number here	\$6,500.00

Official Form 106A/B Schedule A/B: Property page 2

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	ale Lynn Ables tephanie Diane Ables	Case numb	per (if known)
	pe Your Financial Assets or have any legal or equitable interest i	n any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
■ No	Money you have in your wallet, in your h	nome, in a safe deposit box, and on hand when you fi	ile your petition
		counts; certificates of deposit; shares in credit unions ts with the same institution, list each.	s, brokerage houses, and other similar
□ No ■ Yes		Institution name:	
	17.1. Checking	Southeast Bank	\$600.69
	utual funds, or publicly traded stocks Bond funds, investment accounts with b		
	cly traded stock and interests in incorp	porated and unincorporated businesses, includin	g an interest in an LLC, partnership, and
☐ Yes. Giv	re specific information about them Name of entity:		ership:
Negotiable	e instruments include personal checks, ca	potiable and non-negotiable instruments ashiers' checks, promissory notes, and money orders ransfer to someone by signing or delivering them.	s.
☐ Yes. Give	e specific information about them Issuer name:		
	t or pension accounts Interests in IRA, ERISA, Keogh, 401(k),	403(b), thrift savings accounts, or other pension or p	profit-sharing plans
Yes. List	each account separately. Type of account:	Institution name:	
	401(k)	Fidelity	\$2,000.00
Your share Examples:		so that you may continue service or use from a compa , public utilities (electric, gas, water), telecommunicat	
■ No □ Yes		Institution name or individual:	
	(A contract for a periodic payment of mor	ney to you, either for life or for a number of years)	
■ No □ Yes	Issuer name and description.		
26 U.S.C. §	an education IRA, in an account in a § 530(b)(1), 529A(b), and 529(b)(1).	qualified ABLE program, or under a qualified stat	e tuition program.
■ No □ Yes	Institution name and description	on. Separately file the records of any interests.11 U.S	S.C. § 521(c):

Case 1:24-bk-10095-NWW Doc 1 Filed 01/17/24 Entered 01/17/24 16:35:09 Main Document Page 20 of 56 Debtor 1 Dale Lynn Ables Debtor 2 **Stephanie Diane Ables** Case number (if known) 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Current value of the Money or property owed to you? portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information...... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No ☐ Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue

☐ Yes. Describe each claim.......

34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims

☐ Yes. Describe each claim.......

35. Any financial assets you did not already list

■ No

☐ Yes. Give specific information..

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Debtor 1 Debtor 2	Dale Lynn Ables Stephanie Diane Ables		Case number (if known)	
	the dollar value of all of your entries from Part 4, includir			\$2,600.69
Part 5: De	escribe Any Business-Related Property You Own or Have an Inte	rest In. List any real esta	ate in Part 1.	
37. Do you	ı own or have any legal or equitable interest in any business-relat	ted property?		
No. G	Go to Part 6.			
☐ Yes.	Go to line 38.			
	rescribe Any Farm- and Commercial Fishing-Related Property You you own or have an interest in farmland, list it in Part 1.	u Own or Have an Interes	st In.	
46. Do yo	ou own or have any legal or equitable interest in any farm	- or commercial fishir	ng-related property?	
■ No	o. Go to Part 7.			
☐ Ye	es. Go to line 47.			
Part 7:	Describe All Property You Own or Have an Interest in That Yo	u Did Not List Above		
<i>Exam</i> □ No	ou have other property of any kind you did not already list nples: Season tickets, country club membership s. Give specific information			
	Garnished wages by Star Trust Mayfield & Lester PO Box 789, County General Sessions Cour	Chattanooga, TN 3	7401 in Hamilton	\$1,000.00
54. Add	the dollar value of all of your entries from Part 7. Write th	nat number here		\$1,000.00
Part 8:	List the Totals of Each Part of this Form			
55. Part	1: Total real estate, line 2			\$0.00
56. Part	2: Total vehicles, line 5	\$8,000.00		
	3: Total personal and household items, line 15	\$6,500.00		
58. Part	4: Total financial assets, line 36	\$2,600.69		
59. Part	5: Total business-related property, line 45	\$0.00		
	6: Total farm- and fishing-related property, line 52	\$0.00		
61. Part	7: Total other property not listed, line 54	\$1,000.00		
62. Tota	al personal property. Add lines 56 through 61	\$18,100.69	Copy personal property total	\$18,100.69
63. Tota	al of all property on Schedule A/B Add line 55 + line 62			\$18 100 69

Official Form 106A/B Schedule A/B: Property page 5

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Fill in this infor	mation to identify your	case:		
Debtor 1	Dale Lynn Ables			
	First Name	Middle Name	Last Name	
Debtor 2	Stephanie Diane	Ables		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C	F TENNESSEE	
Case number				
(if known)				

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

1.	Which set of exemptions are	you claiming?	? Check one only	, even if	your spouse	is filing	g with	you.
----	-----------------------------	---------------	------------------	-----------	-------------	-----------	--------	------

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	unt of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Chec	k only one box for each exemption.	
2011 Ford F-150 202,000 miles Line from <i>Schedule A/B</i> : 3.1	\$8,000.00	■ .	\$0.00	Tenn. Code Ann. § 26-2-103
			100% of fair market value, up to any applicable statutory limit	
Household Goods Line from Schedule A/B: 6.1	\$2,000.00		\$2,000.00	Tenn. Code Ann. § 26-2-10
Line from Schedule AVD. V.1			100% of fair market value, up to any applicable statutory limit	
Refrigerator & Stove	\$3,500.00	•	\$0.00	Tenn. Code Ann. § 26-2-10
Line Holli Schedule AV.B. 4.2			100% of fair market value, up to any applicable statutory limit	
Electronics Line from Schedule A/B: 7.1	\$500.00	•	\$500.00	Tenn. Code Ann. § 26-2-10
Line from Scriedule AVD. 1.1			100% of fair market value, up to any applicable statutory limit	
Clothes Line from Schedule A/B: 11.1	\$500.00	•	\$500.00	Tenn. Code Ann. § 26-2-10
LINE HOLL SUITEGUIE PAD. 11.1			100% of fair market value, up to any applicable statutory limit	

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		Dale Lynn Ables Stephanie Diane Ables			Case number (if known)	
		escription of the property and line on ule A/B that lists this property	Current value of the Amount of the exemption you claim portion you own		Specific laws that allow exemption	
			Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
		king: Southeast Bank	\$600.69	•	\$600.69	Tenn. Code Ann. § 26-2-103
	LING	om denedate 745. TTT			100% of fair market value, up to any applicable statutory limit	
	•): Fidelity om Schedule A/B: 21.1	\$2,000.00		\$2,000.00	Tenn. Code Ann. § 26-2-111(1)(D)
LI	LING	om denedate 7/D. Z111			100% of fair market value, up to any applicable statutory limit	202 111(1)(0)
		shed wages by Star Trust al Credit Union, attorneys	\$1,000.00		\$1,000.00	Tenn. Code Ann. § 26-2-103
	Mayfi Chatt Cound docke	eld & Lester PO Box 789, anooga, TN 37401 in Hamilton ty General Sessions Court et no. 23GS8935 om Schedule A/B: 53.1			100% of fair market value, up to any applicable statutory limit	
3.		ou claiming a homestead exemption ct to adjustment on 4/01/25 and every o			led on or after the date of adjustmer	nt.)
	□ Y	es. Did you acquire the property cover No	ed by the exemption wi	ithin 1	,215 days before you filed this case	?

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			Main Document	Page 2	24 of 56		
Fill	in this informat	ion to identify you	r case:				
Deb		Dale Lynn Ables		oat Nama			
D . I.				ast Name			
		Stephanie Diane First Name		ast Name			
Unit	ed States Bankr	uptcy Court for the:	EASTERN DISTRICT OF TENNES	SSEE			
Cas	e number					☐ Check	if this is an
						amend	led filing
	icial Form 1		W// - 11 Ol-1 O		L 5		-
Sc	hedule D	: Creditors	Who Have Claims Se	ecured	by Property	y	12/15
is ne			f two married people are filing together, b out, number the entries, and attach it to th				
1. Do	any creditors have	e claims secured by	your property?				
	No. Check thi	s box and submit th	nis form to the court with your other sch	nedules. You	u have nothing else to	report on this form.	
	■ Yes. Fill in all	of the information b	pelow.				
Pari	List All S	ecured Claims					
			nore than one secured claim, list the creditor	r separately	Column A	Column B	Column C
for e	ach claim. If more	than one creditor has	a particular claim, list the other creditors in Fall order according to the creditor's name.		Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1	Aaron's Sale	s & Lease	Describe the property that secures the o	claim:	\$3,500.00	\$3,500.00	\$0.00
	Creditor's Name		Refrigerator & Stove				
	ATTN Bankr		As of the date you file, the claim is: Chec	ck all that			
	1514 Congre Athens, TN 3		apply. ☐ Contingent	or an inat			
	Number, Street, City	, State & Zip Code	☐ Unliquidated				
Who	o owes the debt?	Check one.	☐ Disputed Nature of lien. Check all that apply.				
	Debtor 1 only		An agreement you made (such as mort	gage or secu	red		
	Debtor 2 only		car loan)	- •			
	Debtor 1 and Debto	r 2 only	☐ Statutory lien (such as tax lien, mechan	nic's lien)			
	at least one of the o	lebtors and another	☐ Judgment lien from a lawsuit				

☐ Check if this claim relates to a community debt

Date debt was incurred 2023

☐ Other (including a right to offset)

Last 4 digits of account number

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Debtor 1 Dale Lynn Ables	Case number (if known)				
First Name Middle N	ame Last Name	_			
Debtor 2 Stephanie Diane Ables First Name Middle N	Lost Name				
riist Name i Middle N	ame Last Name				
2.2 Cars and Credit	Describe the property that secures the claim:	\$11,411.82	\$8,000.00	\$3,411.82	
Creditor's Name	2011 Ford F-150 202,000 miles				
Attn: Bankruptcy Dept.					
110 Keith Street	As of the date you file, the claim is: Check all the	ot.			
Northwest	apply.	at			
Cleveland, TN 37311	☐ Contingent				
Number, Street, City, State & Zip Code	Unliquidated				
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.				
☐ Debtor 1 only ☐ Debtor 2 only	 An agreement you made (such as mortgage car loan) 	or secured			
■ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lie	en)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit	,			
☐ Check if this claim relates to a	☐ Other (including a right to offset)				
community debt					
Date debt was incurred 11/2021	Last 4 digits of account number				
2.3 Heights Finance Corp	Describe the property that secures the claim:	\$1,000.00	\$0.00	\$1,000.00	
Creditor's Name	Household Goods				
Attn: Bankruptcy					
Department	As of the date you file, the claim is: Check all the	lat			
P.O. Box 5090	apply.				
Cleveland, TN 37320	Contingent				
Number, Street, City, State & Zip Code	Unliquidated				
Who owes the debt? Check one.	Disputed				
_	Nature of lien. Check all that apply.				
☐ Debtor 1 only ☐ Debtor 2 only	An agreement you made (such as mortgage car loan)	or secured			
_	☐ Statutory lien (such as tax lien, mechanic's lie	201			
Debtor 1 and Debtor 2 only		511)			
☐ At least one of the debtors and another☐ Check if this claim relates to a	Judgment lien from a lawsuit	Avoidable lien on househo	old goods		
community debt	Other (including a right to offset) 522 (f)	Avoidable liell off flouselic	na goods		
Date debt was incurred	Last 4 digits of account number				
2.4 Security Finance	Describe the property that secures the claim:	\$1,000.00	\$0.00	\$1,000.00	
Creditor's Name	Household Goods				
645 Docatus Biles					
615 Decatur Pike Suite 300	As of the date you file, the claim is: Check all th	J at			
Athens, TN 37303	apply.				
Number, Street, City, State & Zip Code	☐ Contingent				
Number, Street, Oity, State & Zip Code	☐ Unliquidated☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only	☐ An agreement you made (such as mortgage	or secured			
Debtor 2 only	car loan)				
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lie	en)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit				
☐ Check if this claim relates to a	•	Avoidable lien on househo	old goods		
community debt	— Onler (including a right to offset)		- J		
Date debt was incurred	Last 4 digits of account number				

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Debtor 1	Dale Lynn	Ables				Case number (if known)		
	First Name	Middle N	ame	Last Name		-		
Debtor 2	Stephanie	Diane Ables						
	First Name	Middle N	ame	Last Name				
2.5 Wo	rld Finance	Corn	Describe the p	roperty that secures th	ne claim:	\$1,000.00	\$0.00	\$1,000.00
	itor's Name	- GOI P	Household			<u>Ψ1,000.00</u>	Ψ0.00	ψ1,000.00
Po Gre	n: Bankrup Box 6429 eenville, SC	29606	apply. Contingent	you file, the claim is: C	heck all that			
Num	ber, Street, City, S	tate & Zip Code	☐ Unliquidated☐ Disputed	d				
Who owe	s the debt? C	heck one.	Nature of lien	. Check all that apply.				
☐ Debtor	☐ Debtor 1 only		☐ An agreement you made (such as mortgage or secured					
Debtor	2 only		car loan)					
☐ Debtor	1 and Debtor 2	only	☐ Statutory lie	n (such as tax lien, mech	nanic's lien)			
At leas	t one of the deb	tors and another	☐ Judgment lie	en from a lawsuit				
	if this claim re unity debt	lates to a	Other (inclu	ding a right to offset)	522 (f) A	voidable lien on househol	d goods	
Date debt	was incurred	Opened 12/16 Last Active 3/24/23	_ Last 4 c	ligits of account numbe	er <u>910</u>	<u> </u>		
If this is		of your form, add		page. Write that numb totals from all pages.	er here:	\$17,911.82 \$17,911.82		

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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			Main Docume	IIL FC	iye Zi	01 30	-		
Fill ir	n this inforn	nation to identify your cas	e:						
Debte	or 1	Dale Lynn Ables							
		First Name	Middle Name	Last Nan	ne				
Debte		Stephanie Diane Abl							
(Spous	se if, filing)	First Name	Middle Name	Last Nan	ne				
Unite	d States Ba	nkruptcy Court for the: E	ASTERN DISTRICT OF TE	ENNESSEE					
Case	number								
(if know	_						☐ Check	if this is an	
							ameno	ded filing	
∩ffi∂	sial Forn	n 106E/F							
		:/F: Creditors Who	. Have Unsecure	d Clair	16			12/15	
		d accurate as possible. Use Pa				or creditors with NON	IPRIORITY claims 1		
Sched Sched left. At	ule G: Execu ule D: Credit tach the Con	tracts or unexpired leases that tory Contracts and Unexpired ors Who Have Claims Secured Itinuation Page to this page. If the of the word if the page of the page	Leases (Official Form 106G) by Property. If more space). Do not incl is needed, c	lude any cre opy the Par	editors with partially s t you need, fill it out,	secured claims that a number the entries i	are listed in n the boxes o	on the
Part	1: List A	II of Your PRIORITY Unsec	cured Claims						
1. D	o any credito	ors have priority unsecured cl	aims against you?						
	No. Go to P	Part 2.							
	Yes.								
id P	lentify what ty ossible, list the art 1. If more	r priority unsecured claims. If pe of claim it is. If a claim has be e claims in alphabetical order act than one creditor holds a particulation of each type of claim, see the	oth priority and nonpriority and ecording to the creditor's name alar claim, list the other creditor	ounts, list that I. If you have r rs in Part 3.	claim here a more than tv	and show both priority a	and nonpriority amoun aims, fill out the Conti Priority	ts. As much as nuation Page of Nonpriority	of
2.1	Internal	Revenue Service	Last 4 digits of acc	ount numbe	r	\$350.00	amount \$350.00	amount	\$0.00
J	Priority Cr	editor's Name							*****
		ankruptcy	When was the debt	incurred?	2022		_		
	P.O. Bo Philade	lphia, PA 19101-7317							
		treet City State Zip Code	As of the date you f	file, the clain	n is: Check	all that apply			
	Who incurre	d the debt? Check one.	☐ Contingent						
	Debtor 1 o	only	☐ Unliquidated						
	Debtor 2 o	only	☐ Disputed						
	Debtor 1 a	and Debtor 2 only	Type of PRIORITY (unsecured c	laim:				
	☐ At least or	ne of the debtors and another	☐ Domestic suppor	t obligations					
	☐ Check if t	his claim is for a community	debt Taxes and certain	n other debts	vou owe the	e government			
		subject to offset?	☐ Claims for death		-	_			
	■ No		Other. Specify						
	☐ Yes		' '=						
Part :	2: List A	II of Your NONPRIORITY U	Insecured Claims						
3. D	o any credito	ors have nonpriority unsecure	d claims against you?						
	No. You ha	ve nothing to report in this part.	Submit this form to the court w	ith your other	schedules.				
	Yes.								
4. L	ist all of you	r nonpriority unsecured claim	s in the alphabetical order of	the creditor	who holds	each claim. If a credit	or has more than one	nonpriority	

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

Total claim

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	Dale Lynn Ables Stephanie Diane Ables	Case number (if known)	
4.1	Advance America	Last 4 digits of account number	\$250.00
	Nonpriority Creditor's Name Attn: Bankruptcy Dept. 2340 McGrady Dr. SE, Suite C	When was the debt incurred?	Ψ230.30
	Cleveland, TN 37323 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	_	☐ Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.2	Alliant Capital Management Nonpriority Creditor's Name	Last 4 digits of account number	\$613.54
	1965 Sheridan Drive Suite 100	When was the debt incurred?	
-	Buffalo, NY 14223 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.3	Amazon Credit Nonpriority Creditor's Name	Last 4 digits of account number	\$300.00
	Attn: Bankruptcy Dept. P.O. Box 689182 Des Moines, IA 50368-9182	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	Other, Specify	

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Debto	2 Stephanie Diane Ables	Case number (if known)	
4.4	American Rental	Last 4 digits of account number	\$421.00
	Nonpriority Creditor's Name 1434 Decatur Pike Athens, TN 37303	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.5	Ameritrust Financial Services Nonpriority Creditor's Name	Last 4 digits of account number	\$300.00
	Attn: Bankruptcy Department 2540 Keith Street NW	When was the debt incurred?	
	Cleveland, TN 37312		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only		
		Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	Student loans	
	Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	Other. Specify	
4.6	Pantiald Det Haanital	Last 4 digits of account number	¢700.00
4.0	Banfield Pet Hospital Nonpriority Creditor's Name		\$700.00
	c/o Alliscar Vet Services, LLC 8000 NE Tillamook Street Portland, OR 97213	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	

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Debto	or 2 Stephanie Diane Ables	Case number (if known)	
4.7	Cash Express	Last 4 digits of account number	\$488.00
	Nonpriority Creditor's Name		Ψ+00.00
	ATTN Bankruptcy	When was the debt incurred?	
	4121 Ringgold Road		
	Chattanooga, TN 37412 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim is. Oneck all that apply	
	Debtor 1 only	Поли	
	Debtor 2 only	☐ Contingent	
		Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify	
4.8	Check Express of America	Last 4 digits of account number	\$1,750,00
	Nonpriority Creditor's Name		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
	ATTN: Bankruptcy Department	When was the debt incurred?	
	1505 Decatur Pike		
	Athens, TN 37303 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	,	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	_ `	
		☐ Disputed Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt	_	
	Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.9	Comcast	Last 4 digits of account number	\$200.00
1.0	Nonpriority Creditor's Name		Ψ200.00
	3251 Players Club Parkway Memphis, TN 38125	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	Other Specify	

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Comenity - HSN	Last 4 digits of account number	\$250.0
Nonpriority Creditor's Name PO Box 659707	When was the debt incurred?	
San Antonio, TX 78265-9707 Number Street City State Zip Code	As of the date you file the plains in Observal all that such	
Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only		
■ Debtor 1 and Debtor 2 only	☐ Unliquidated ☐ Disputed	
	Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
■ Yes	Other. Specify	
Companity Comital/DDC		£400.00
ComenityCapital/PPC Nonpriority Creditor's Name	Last 4 digits of account number	\$488.00
Attn: Bankruptcy Dept. PO Box 182120	When was the debt incurred?	
Columbus, OH 43218 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim is. Oneck all that apply	
☐ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	
Credit Central	Last 4 digits of account number	\$904.00
Nonpriority Creditor's Name	Last 4 digits of account number	Ψου που
Attn: Bankruptcy	When was the debt incurred?	
700 17th Street, NW		
Cleveland, TN 37311 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	, , , , , , , , , , , , , , , , , , , ,	
☐ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□Yes	Other Specify	

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	or 1 Dale Lynn Ables or 2 Stephanie Diane Ables	Case number (if known)	
4.1 3	DishNetwork	Last 4 digits of account number	\$250.00
	Nonpriority Creditor's Name Attn: Bankruptcy Dept. PO Box 6633 Englewood, CO 80112	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent ☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community	☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No □ Yes	□ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify	
4.1	Dollywood	Last 4 digits of account number	\$900.00
	Nonpriority Creditor's Name 2700 Dollywood Parks Blvd Pigeon Forge, TN 37863	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	lacktriangle At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.1 5	Fingerhut	Last 4 digits of account number	\$300.00
	Nonpriority Creditor's Name Attn: Bankruptcy Dept. 6250 Ridgewood Road Saint Cloud, MN 56303	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify	

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Debt	or 2 Stephanie Diane Ables	Case number (if known)	
4.1	H&R Block		\$150.00
6	Nonpriority Creditor's Name Attn: Bankruptcy Dept. 1842 South 15th St	Last 4 digits of account number When was the debt incurred?	\$130.00
	Milwaukee, WI 53204 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.1	Mariner Finance	Last 4 digits of account number	\$984.89
7	Nonpriority Creditor's Name	Last 4 digits of account number	Ψου τισο
	ATTN: Bankruptcy Dept 1728 Highway 192 W Ste 2	When was the debt incurred?	
	London, KY 40741 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.1	Medical Debt	Last 4 digits of account number	\$20.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	c/o AFNI, Inc. Attn: Bankruptcy Dept. P.O. Box 3068	when was the dept incurred?	
	Bloomington, IL 61702-3068 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify	

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Debto	Stephanie Diane Ables	Case number (if known)	
4.1	Medical Debt	Look deligites of account assembles	\$300.00
9	Nonpriority Creditor's Name	Last 4 digits of account number	Ψ300.00
	c/o ARS	When was the debt incurred?	
	Attn: Bankruptcy Department 954 Baymeadows Way		
	Jacksonville, FL 32256		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.2	Medical Debt	Last 4 digits of account number	\$550.00
	Nonpriority Creditor's Name		
	c/o Wakefield & Associates	When was the debt incurred?	
	7005 Middlebrook Pike, Ste. 2 PO Box 50250		
	Knoxville, TN 37950-0250		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.2	Morgan's Rent to Own Center	Last 4 digits of account number V989	\$7,778.82
	Nonpriority Creditor's Name		
	c/o Susan E. Arnold, Attorney 1548 Market Street	When was the debt incurred? 2023	
	Dayton, TN 37321 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the diam is. Offect all that apply	
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only		
	_	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify	
	50	— Outer, Specify	

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Debtor 1 Dale Lynn Ables Debtor 2 Stephanie Diane Ables Case number (if known) 4.2 **National Credit Adjusters** \$506.34 Last 4 digits of account number 2 Nonpriority Creditor's Name **ATTN Bankruptcy** When was the debt incurred? P.O. Box 3023 327 W. 4th St. Hutchinson, KS 67504-3023 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.2 **Physician Services of Cleveland** \$474.00 Last 4 digits of account number 3 Nonpriority Creditor's Name Attn: Bankruptcy Dept. When was the debt incurred? 6500 Bowden Road Suite 100 Jacksonville, FL 32216-8055 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.2 **Quick Loans** \$250.00 Last 4 digits of account number Nonpriority Creditor's Name ATTN: Bankruptcy When was the debt incurred? 2306 Keith Street NW Cleveland, TN 37311 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify

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Debtor Debtor	1 Dale Lynn Ables 2 Stephanie Diane Ables	Case number (if known)	
4.2	Rapid Cash of Athens	Last 4 digits of account number	\$1,794.00
	Nonpriority Creditor's Name 1505 Decatur Pike Athens, TN 37303	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.2	Rent A Center	Last 4 digits of account number	\$550.00
	Nonpriority Creditor's Name 1864 Decatur Pike Athens, TN 37303	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.2	Skyridge Medical Center	Last 4 digits of account number	\$1,750.00
	Nonpriority Creditor's Name		
	Attn: Payroll 2305 Chambliss Avenue Cleveland, TN 37311-3847	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other Specify	

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	1 Dale Lynn Ables 2 Stephanie Diane Ables	Case number (if known)	
4.2	Southeastern Emergency		4
8	Physicians Nonpriority Creditor's Name	Last 4 digits of account number	\$159.10
	ATTN Bankruptcy	When was the debt incurred?	
	265 Brookview Centre Way #400		
	Knoxville, TN 37919		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	_	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.2	Spring Oaks Capital LLC		¢242 EE
9	Spring Oaks Capital, LLC Nonpriority Creditor's Name	Last 4 digits of account number	\$312.55
	ATTN Bankruptcy	When was the debt incurred?	
	PO Box 1216		
	Chesapeake, VA 23327		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	_	
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.3	Star Trust Financial Services, LLC	Last 4 digits of account number 8935	\$563.29
0	Nonpriority Creditor's Name	Last 4 digits of account number	Ψ000.20
	c/o Mayfield & Lester P.O. Box 789	When was the debt incurred? 2023	
	Chattanooga, TN 37401-0789		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	

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	or 2 Stephanie Diane Ables	Case number (if known)				
4.3	Sunrise Acceptance	Last 4 digits of account number	\$12,257.00			
1	Nonpriority Creditor's Name Attn: Lisa Beckler P.O. Box 2577	When was the debt incurred?	Ψ12,237.00			
	Cleveland, TN 37320 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	■ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify				
4.3	US Dept of Education	Last 4 digits of account number	\$63,919.05			
	Nonpriority Creditor's Name Attn: Bankruptcy Dept. PO Box 5609	When was the debt incurred?				
	Greenville, TX 75403-5609 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	Debtor 1 only	☐ Contingent				
	■ Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims				
	No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	☐ Yes					
	Li res	Other. Specify				
4.3 3	WEBBANK/DFS Nonpriority Creditor's Name	Last 4 digits of account number	\$175.00			
	Attn: Bankruptcy Dept. 1 Dell Way	When was the debt incurred?				
	Round Rock, TX 78682 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	■ Debtor 1 and Debtor 2 only	☐ Disputed				
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	☐ Yes	Other. Specify				

Part 3: List Others to Be Notified About a Debt That You Already Listed

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Debtor 2 Stephanie Diane Ables		Case number (if known)				
is trying to collect from you for a debt you owe	to someone else, list the original cree ts that you listed in Parts 1 or 2, list th	t that you already listed in Parts 1 or 2. For example, if a collection agency ditor in Parts 1 or 2, then list the collection agency here. Similarly, if you e additional creditors here. If you do not have additional persons to be				
Name and Address Banfield Pet Hospital 2130 Gunbarrel Road Chattanooga, TN 37421	On which entry in Part 1 or Part 2 or Line 4.6 of (<i>Check one</i>):	did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims				
	Last 4 digits of account number					
Name and Address Hamilton County General Sessions Court 102 Courts Building 600 Market Street	On which entry in Part 1 or Part 2 or Line 4.30 of (Check one):	did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims				
Chattanooga, TN 37402	Last 4 digits of account number	8935				
Name and Address Morgan's Rent to Own Center ATTN Bankruptcy 1399 Market Street	On which entry in Part 1 or Part 2 of Line 4.21 of (Check one):	did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims				
Dayton, TN 37321	Last 4 digits of account number	V989				
Name and Address Rhea County General Sessions Court 1475 Market Street, Room 102	On which entry in Part 1 or Part 2 of Line 4.21 of (Check one):	did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims				
Dayton, TN 37321-1047	Last 4 digits of account number	V989				
Name and Address Star Trust Financial Services, LLC ATTN Bankruptcy Department 5910 Reagan Lane Ste 103	On which entry in Part 1 or Part 2 of Line 4.30 of (Check one):	did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims				
Ooltewah, TN 37363	Last 4 digits of account number	8935				
Part 4: Add the Amounts for Each Type	of Unsecured Claim					
		stical reporting purposes only. 28 U.S.C. §159. Add the amounts for each				
type of unbecared cialili.		Total Claim				

				Total Claim
Total claims	6a.	Domestic support obligations	6a.	\$ 0.00
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 350.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 350.00
				Total Claim
Total	6f.	Student loans	6f.	\$ 63,919.05
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 36,689.53
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 100,608.58

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Fill in this infor	mation to identify your	case:		
Debtor 1	Dale Lynn Ables			
	First Name	Middle Name	Last Name	
Debtor 2	Stephanie Diane	Ables		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C	F TENNESSEE	
Case number				
(if known)				☐ Check
				amende

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

State what the contract or lease is for

Aaron's Sales & Lease
ATTN Bankruptcy
1514 Congress Pwy S
Athens, TN 37303

Refrigerator & Stove

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		Main Ducu	mem raye 4	1 01 30	
Fill in this inf	ormation to identify your	case:			
Debtor 1	Dale Lynn Ables				
	First Name	Middle Name	Last Name		
Debtor 2	Stephanie Diane	Ables			
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	EASTERN DISTRICT C	F TENNESSEE		
Case number					☐ Check if this is an
					amended filing
Official F	Form 106H				
Schedu	le H: Your Cod	ebtors			12/15
1. Do you No Yes 2. Within Arizona, G No. Go Yes. D 3. In Columnin line 2 a	California, Idaho, Louisiana, to line 3. id your spouse, former spouse, n 1, list all of your codebtagain as a codebtor only i	you are filing a joint case, I lived in a community pr Nevada, New Mexico, Pu use, or legal equivalent live ors. Do not include your f that person is a guaran	coperty state or territor erto Rico, Texas, Wash with you at the time? spouse as a codebtor tor or cosigner. Make	y? (Community property : ington, and Wisconsin.) if your spouse is filing sure you have listed the	states and territories include with you. List the person shown
out Colu	mn 2.	Form 106E/F), or Sched	ule G (Official Form 10		chedule E/F, or Schedule G to fill
	umn 1: Your codebtor e, Number, Street, City, State and ZI	P Code		Column 2: The cred Check all schedules	itor to whom you owe the debt that apply:
3.1				☐ Schedule D, line	
Nam	ne			Schedule E/F, lin	
				☐ Schedule G, line	
Num	nber Street			_	
City		State	ZIP Code		
3.2				☐ Schedule D, line	
Nam	ne			_ □ Schedule E/F, lin	
				☐ Schedule G, line	
Num	nber Street			_	
City		State	ZIP Code		

Fill in this informa	ation to identify your case:	
Debtor 1	Dale Lynn Ables	
Debtor 2 (Spouse, if filing)	Stephanie Diane Ables	
United States Bar	nkruptcy Court for the: EASTERN DISTRICT OF TENNESSEE	
Case number		Check if this is:
(If known)		☐ An amended filing
		A supplement showing postpetition chapter 13 income as of the following date:
Official Fo	orm 106I	MM / DD/ YYYY
Schedule	l: Your Income	12/15
Be as complete a	and accurate as possible. If two married people are filing together (De	btor 1 and Debtor 2), both are equally responsible for

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Describe Employment Fill in your employment Debtor 1 Debtor 2 or non-filing spouse information. Employed Employed If you have more than one job, **Employment status** attach a separate page with ■ Not employed ■ Not employed information about additional employers. Occupation **Service Coordinator Online Teacher** Include part-time, seasonal, or **Employer's name Adient US Varsity Tutors** self-employed work. **Employer's address** Occupation may include student 101 S Hanley Road 49200 Halyard Drive or homemaker, if it applies. Ste 300 Plymouth, MI 48170 Kansas City, MO 64111-1818 How long employed there? 43 years 2 years

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 2 or For Debtor 1 non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 4,455.00 0.00 2. 2. deductions). If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay. 3. +\$ 0.00 +\$ 0.00 Calculate gross Income. Add line 2 + line 3. 4,455.00 0.00

Official Form 106I Schedule I: Your Income page 1

	otor 1 otor 2	Dale Lynn Ables Stephanie Diane Ables			Case	number (<i>if k</i>	nown)				
					For	Debtor 1			r Debtor n-filing s		
	Cop	y line 4 here	4.		\$	4,45	5.00	\$	J	0.00	-
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	58	а.	\$	52	0.00	\$		0.00	
	5b.	Mandatory contributions for retirement plans	5b	ο.	\$		0.00	\$		0.00	_
	5c.	Voluntary contributions for retirement plans	50	Э.	\$_	26	0.00	\$		0.00	-
	5d.	Required repayments of retirement fund loans	50	d.	\$	7	8.00	\$		0.00	-
	5e.	Insurance	56	€.	\$	23	8.00	\$_		0.00	_
	5f.	Domestic support obligations	5f		\$_		0.00	\$_		0.00	-
	5g.	Union dues	50	-	\$_		0.00	\$_		0.00	-
	5h.	Other deductions. Specify:	5r	า.+	\$_		0.00	+ \$_		0.00	-
6.	Add	I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$_	1,09	6.00	\$_		0.00	-
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$_	3,35	9.00	\$_		0.00	-
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total			•			•			
	Oh	monthly net income. Interest and dividends	88		\$_ \$		0.00	\$_ \$		0.00	_
	8b. 8c.	Family support payments that you, a non-filing spouse, or a depender regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8k nt 80		\$ \$		0.00	Ψ_ \$		0.00	=
	8d.	Unemployment compensation	80		\$		0.00	\$_		0.00	_
	8e.	Social Security	86		\$_		0.00	\$-		0.00	-
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f		\$		0.00	\$_		0.00	-
	8g.	Pension or retirement income	80	_	\$		0.00	\$_		0.00	_
	8h.	Other monthly income. Specify: Part time job	8h	Դ.+	\$_		0.00	+ \$_		400.00	-
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.		\$		0.00	\$_		400.00)
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$_	;	3,359.00	+ \$		400.00	= \$	3,759.00
11.	State Inches other Do	te all other regular contributions to the expenses that you list in Schedul cude contributions from an unmarried partner, members of your household, you are friends or relatives. not include any amounts already included in lines 2-10 or amounts that are no cify:	ur dep		•						0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The ree that amount on the Summary of Schedules and Statistical Summary of Certilies							e. 12.	\$Combin	
13.	Do :	you expect an increase or decrease within the year after you file this form No. Yes. Explain:	m?							monthly	y income
	ш	i oo. Explain.									

Debtor 1 Dale Lynn Ables Obtor 2 Stephanie Diane Ables Obtor 2 Stephanie Diane Ables (Spoose, filling) United States Barnkuptcy Court for the: EASTERN DISTRICT OF TENNESSEE Official Form 106J Schedule J: Your Expenses Case number (it known) Schedule J: Your Expenses Be a s complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, statch another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Is this a joint case? No. Go to line 2. You So Des Debtor 2 live in a separate household? No. Go to line 2. You So Des Debtor 2 live in a separate household? You So Des Debtor 2 live in a separate household? No. Do not list Debtor 1 and Pyos. Do not state the dependents anames. Son 16 Pyos No N	Fill	in this informa	ation to identify yo	our case:			I		
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	5.					me equity loans	4d. \$ 5. \$		0.00 0.00

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Deb	tor 1 tor 2	Dale Lyn	nn Ables ie Diane Ables	Case num	ber (if known)	
		2.56.19.1			_	
6.	Utilit					
	6a.	Electricity,	heat, natural gas	6a.	*	280.00
	6b.	-	wer, garbage collection	6b.	\$	60.00
	6c.	Telephone	e, cell phone, Internet, satellite, and cable services	6c.	\$	220.00
	6d.	Other. Spe		6d.	\$	0.00
7.	Food	d and house	ekeeping supplies	7.	\$	800.00
8.	Child	dcare and c	children's education costs	8.	\$	0.00
9.	Cloth	hing, laund	ry, and dry cleaning	9.	\$	100.00
10.	Pers	onal care p	products and services	10.	\$	0.00
11.	Medi	ical and dei	ntal expenses	11.	\$	75.00
12.	Tran	sportation.	Include gas, maintenance, bus or train fare.			100.00
			ar payments.	12.	\$	400.00
13.	Ente	rtainment,	clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
14.	Char	ritable cont	ributions and religious donations	14.	\$	0.00
15.		rance.				
			surance deducted from your pay or included in lines 4 or 2		_	
		Life insura		15a.	*	0.00
		Health ins		15b.	*	0.00
	15c.	Vehicle ins	surance	15c.	\$	71.00
			ırance. Specify:	15d.	\$	0.00
16.	Taxe	s. Do not in	clude taxes deducted from your pay or included in lines 4	or 20.		<u> </u>
	Spec	cify:		16.	\$	0.00
17.			ease payments:			
			ents for Vehicle 1	17a.	·	706.00
	17b.	Car payme	ents for Vehicle 2	17b.	\$	0.00
	17c.	Other. Spe	ecify: Aaron's Sales & Lease	17c.	\$	333.00
	17d.	Other. Spe	ecify:	17d.	\$	0.00
18.			of alimony, maintenance, and support that you did not		•	2.22
			your pay on line 5, Schedule I, Your Income (Official Fo		·	0.00
19.			s you make to support others who do not live with you.		\$	0.00
	Spec	,		19.		
20.			erty expenses not included in lines 4 or 5 of this form of			0.00
			s on other property	20a.	·	0.00
		Real estat		20b.		0.00
			homeowner's, or renter's insurance	20c.	·	0.00
			nce, repair, and upkeep expenses	20d.	·	0.00
	20e.	Homeown	er's association or condominium dues	20e.	·	0.00
21.	Othe	er: Specify:		21.	+\$	0.00
22	Calc	ulate vour i	monthly expenses			
22.		•	through 21.		\$	3,745.00
			2 (monthly expenses for Debtor 2), if any, from Official For	n 106 L-2	\$	3,743.00
				11 1003-2		
	22c.	Add line 22a	a and 22b. The result is your monthly expenses.		\$	3,745.00
23.	Calc	ulate vour i	monthly net income.			
			12 (your combined monthly income) from Schedule I.	23a.	\$	3,759.00
			monthly expenses from line 22c above.	23b.		3,745.00
	_55.	oop, jour	, expenses non me also dove.	200.	Ť	<u> </u>
	23c.	Subtract v	our monthly expenses from your monthly income.			
			is your monthly net income.	23c.	\$	14.00
			•			
24.			an increase or decrease in your expenses within the ye			
			ou expect to finish paying for your car loan within the year or do you	expect your mortgage (payment to increase	or decrease because of a
			terms of your mortgage?			
	■ No					
	☐ Ye	es.	Explain here:			

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Fill in this infor	rmation to identify your	ase:	
Debtor 1			
Debior 1	Dale Lynn Ables First Name	Middle Name Last Name	
Debtor 2	Stephanie Diane		
(Spouse if, filing)	First Name	Middle Name Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT OF TENNESSEE	
Case number			
(if known)			☐ Check if this is an amended filing
If two married p You must file th	tion About a	connection with a bankruptcy case can result	
Sig	ın Below		
	ay or agree to pay some	ne who is NOT an attorney to help you fill ou	t bankruptcy forms?
■ No			
☐ Yes.	Name of person		Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
	alty of perjury, I declare re true and correct.	hat I have read the summary and schedules f	iled with this declaration and
X /s/ Dal	le Lynn Ables	X /s/ Steph	nanie Diane Ables
Dale L	ynn Ables	Stephan	ie Diane Ables
Signatu	ure of Debtor 1	Signature	of Debtor 2
Date	December 15, 2023	Date D e	ecember 15, 2023

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$78	administrative fee
+ \$15	trustee surcharge
\$338	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$571 administrative fee \$1,738 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$78	administrative fee
	\$278	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$78	administrative fee
	\$313	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/forms/bankruptcy-forms

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.uscourts.gov/services-forms/bankruptcy/cre dit-counseling-and-debtor-education-courses.

In Alabama and North Carolina, go to: http://www.uscourts.gov/services-forms/bankruptcy/cre dit-counseling-and-debtor-education-courses.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

United States Bankruptcy Court Eastern District of Tennessee

In re	Stephanie Diane Ables		Case No.	
	•	Debtor(s)	Chapter	7

VERIFICATION OF CREDITOR MATRIX

The above Debtor(s) hereby verifies under the penalty of perjury under the laws of the United States of America that the attached list of creditors is true and correct to the best of his/her knowledge.

Date:	December 15, 2023	/s/ Dale Lynn Ables	
		Dale Lynn Ables	
		Signature of Debtor	
Date:	December 15, 2023	/s/ Stephanie Diane Ables	
		Stephanie Diane Ables	
		Signature of Debtor	
Date:	December 15, 2023	/s/ Eron H. Epstein	
		Signature of Attorney	
		Eron H. Epstein 007007	
		Bankruptcy Affiliates	
		713 Cherry Street	
		Chattanooga, TN 37402	

423-267-1512 Fax: 423-267-0809

Aaron's Sales & Lease ATTN Bankruptcy 1514 Congress Pwy S Athens, TN 37303

Advance America Attn: Bankruptcy Dept. 2340 McGrady Dr. SE, Suite C Cleveland, TN 37323

Alliant Capital Management 1965 Sheridan Drive Suite 100 Buffalo, NY 14223

Amazon Credit Attn: Bankruptcy Dept. P.O. Box 689182 Des Moines, IA 50368-9182

American Rental 1434 Decatur Pike Athens, TN 37303

Ameritrust Financial Services Attn: Bankruptcy Department 2540 Keith Street NW Cleveland, TN 37312

Banfield Pet Hospital c/o Alliscar Vet Services, LLC 8000 NE Tillamook Street Portland, OR 97213

Banfield Pet Hospital 2130 Gunbarrel Road Chattanooga, TN 37421

Cars and Credit Attn: Bankruptcy Dept. 110 Keith Street Northwest Cleveland, TN 37311

Cash Express ATTN Bankruptcy 4121 Ringgold Road Chattanooga, TN 37412

Check Express of America ATTN: Bankruptcy Department 1505 Decatur Pike Athens, TN 37303 Comcast 3251 Players Club Parkway Memphis, TN 38125

Comenity - HSN PO Box 659707 San Antonio, TX 78265-9707

ComenityCapital/PPC Attn: Bankruptcy Dept. PO Box 182120 Columbus, OH 43218

Credit Central Attn: Bankruptcy 700 17th Street, NW Cleveland, TN 37311

DishNetwork Attn: Bankruptcy Dept. PO Box 6633 Englewood, CO 80112

Dollywood 2700 Dollywood Parks Blvd Pigeon Forge, TN 37863

Fingerhut
Attn: Bankruptcy Dept.
6250 Ridgewood Road
Saint Cloud, MN 56303

H&R Block Attn: Bankruptcy Dept. 1842 South 15th St Milwaukee, WI 53204

Hamilton County General Sessions Court 102 Courts Building 600 Market Street Chattanooga, TN 37402

Heights Finance Corp Attn: Bankruptcy Department P.O. Box 5090 Cleveland, TN 37320

Internal Revenue Service Attn: Bankruptcy P.O. Box 7317 Philadelphia, PA 19101-7317 Mariner Finance ATTN: Bankruptcy Dept 1728 Highway 192 W Ste 2 London, KY 40741

Medical Debt c/o AFNI, Inc. Attn: Bankruptcy Dept. P.O. Box 3068 Bloomington, IL 61702-3068

Medical Debt c/o ARS Attn: Bankruptcy Department 954 Baymeadows Way Jacksonville, FL 32256

Medical Debt c/o Wakefield & Associates 7005 Middlebrook Pike, Ste. 2 PO Box 50250 Knoxville, TN 37950-0250

Morgan's Rent to Own Center c/o Susan E. Arnold, Attorney 1548 Market Street Dayton, TN 37321

Morgan's Rent to Own Center ATTN Bankruptcy 1399 Market Street Dayton, TN 37321

National Credit Adjusters ATTN Bankruptcy P.O. Box 3023 327 W. 4th St. Hutchinson, KS 67504-3023

Physician Services of Cleveland Attn: Bankruptcy Dept. 6500 Bowden Road Suite 100 Jacksonville, FL 32216-8055

Quick Loans ATTN: Bankruptcy 2306 Keith Street NW Cleveland, TN 37311

Rapid Cash of Athens 1505 Decatur Pike Athens, TN 37303 Rent A Center 1864 Decatur Pike Athens, TN 37303

Rhea County General Sessions Court 1475 Market Street, Room 102 Dayton, TN 37321-1047

Security Finance 615 Decatur Pike Suite 300 Athens, TN 37303

Skyridge Medical Center Attn: Payroll 2305 Chambliss Avenue Cleveland, TN 37311-3847

Southeastern Emergency Physicians ATTN Bankruptcy 265 Brookview Centre Way #400 Knoxville, TN 37919

Spring Oaks Capital, LLC ATTN Bankruptcy PO Box 1216 Chesapeake, VA 23327

Star Trust Financial Services, LLC c/o Mayfield & Lester P.O. Box 789 Chattanooga, TN 37401-0789

Star Trust Financial Services, LLC ATTN Bankruptcy Department 5910 Reagan Lane Ste 103 Ooltewah, TN 37363

Sunrise Acceptance Attn: Lisa Beckler P.O. Box 2577 Cleveland, TN 37320

US Dept of Education Attn: Bankruptcy Dept. PO Box 5609 Greenville, TX 75403-5609

WEBBANK/DFS Attn: Bankruptcy Dept. 1 Dell Way Round Rock, TX 78682 World Finance Corp Attn: Bankruptcy Po Box 6429 Greenville, SC 29606